## SELF-NOMINATION AND ACCEPTANCE FOR UPPER THOMPSON SANITATION DISTRICT

I, $\underline{\hspace{1cm}}$ (full name of candidate as the name will appear on the ballot)	e at:
(full name of candidate as the name will appear on the ballot)	
Residence Street Address	
City or Town, Zip Code	
County	
hereby nominate myself and accept such nomination for the District, Larimer County, Colorado, for a four (4) year terconducted on May 3, 2016.	
I affirm that I am an eligible elector of the Upper Self-Nomination and Acceptance form.	Thompson Sanitation District at the date of signing this
Mark here if you are a member of an Execu association), as defined in Section 38-33.3-103, C.R.S., lo District, if applicable) for which you are running for office	
Section 1-45-110, C.R.S., and I will not, in my campaign	ons of the Fair Campaign Practices Act as required in for this office, receive contributions or make expenditures ring the election cycle, however, if I do so, I will thereafter fair Campaign Practices Act.
DATED this day of, 20	16.
Signature of Candidate	Printed Full Name
Mailing Address (if different)	Telephone Number
City or Town, Zip Code	Email Address
WITNESSED by the following registered elector	of the State:
Signature of Witness	Printed Full Name
Residence Street Address	Telephone Number
City or Town, Zip Code	Email Address
County	
Received this day of, 2016.	
	Designated Election Official

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